Correspondence

The Editorial Board will be pleased to receive and consider for publication correspondence containing information of interest to physicians or commenting on issues of the day. Letters ordinarily should not exceed 600 words, and must be typewritten, double-spaced and submitted in duplicate (the original typescript and one copy). Authors will be given an opportunity to review any substantial editing or abridgment before publication.

Factors in Preventive Medicine

TO THE EDITOR: It is encouraging in the article on preventive medicine by David Maron[1] to see that a medical student is showing so much interest in that field and has reviewed the literature so extensively.

Perhaps he is unaware of the fact that for at least 25 years many of us have used periodic screening methods rather than "the traditional annual examinations." Primary physicians' offices have also long been places for helping patients change their life habits.

In regard to his suggestion that primary and secondary prevention are more important than tertiary, is there any evidence this is true? All three are important. Many people will not seek medical attention until there is a problem. Ongoing management of hypertension for example, has already been shown to be useful in reducing noncoronary events (from 55 percent to 18 percent in five years in a 1970 Veterans Administration study[2]).

Mr. Maron's point that we need to evaluate successes and failures is good. However, outside of a group setting or institution, who is going to pay primary physicians to keep and analyze statistics?

Perhaps one of the most important factors in prevention is not mentioned in this article—the environmental and social impact of factors that we cannot control, but can only strive to change. For example, how can we talk about good nutrition while there are still thousands of hungry people in our society? Would assuring an adequate income for all people do more in prevention?

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REFERENCES

1. Maron DG: Preventive medicine in practice: The state of the art (From a Medical Student). West J Med 134:367-372, Apr 1981
2. Hazzard WR: Aging and atherosclerosis: Interactions with diet, heredity, and associated risk factors, *In* Aging and Elderly—Syllabus CME 0962-0962A, Dec 11-12, 1980. Seattle, CME, Univ Washington School of Medicine, p B-8

Ballistics Information in Gunshot Wounds

TO THE EDITOR: It was very interesting to read the report by Drs. Dart, Braitman and Larlarb on gunshot wounds of the descending thoracic aorta[1] in the May issue.

I felt one should call attention to the fact that information concerning the ballistics of the particular injuries was not included in the case presentation. Such information as caliber, length of barrel, bullet configuration and distance of the weapon from the victim are critical factors that determine the outcome and survival in such cases. The hypervelocity calibers that are now being used are causing terrible damage, often irreparable. The hypervelocity shock wave generated by these calibers do far more damage than the remaining entry or exit wound leads the eye to believe.

Dr. Dart and his co-workers should be commended on these "heroic saves"; however, more ballistics information should be included in the medical literature discussing gunshot wounds in order to understand the mechanism of injury.

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REFERENCE

1. Dart CH, Braitman HE, Larlarb S: Gunshot penetrating injuries of the descending aorta. West J Med 134:442-446, May 1981

EDITOR'S NOTE: Two articles and three letters bearing on Dr. Simon's comments have appeared in the journal in the past several years. The three letters, under the title "Facts on Ballistics," appeared in the November 1978 issue, page 437. The two articles are as follows:

1. Wilson J: Wound ballistics (Trauma Rounds). West J Med 127:49-54, Jul 1977
2. Wilson JM: Shotgun ballistics and shotgun injuries (Trauma Rounds). West J Med 129:149-155, Aug 1978

The Human Computers

TO THE EDITOR: "Buy your next car from us—we have computers on board!" This is today's appeal from the auto industry. Yes, we can have tomorrow's automobile today, armed with computers that are capable of telling us how far we are from our destination, what time we will arrive and whether we have enough fuel to take us there.

Each day the mail brings us flyers describing